## Index of Claims 10589851 Examiner Michael Szperka

| Application/Control No. | Applicant(s)/Patent Under Reexamination |
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| 10589851                | TROWSDALE ET AL.                        |
| Examiner                | Art Unit                                |
| Michael Szperka         | 1644                                    |

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|       | 10       | ÷            | N          |  |      |          |   |               |
|       | 11       | ÷            | N          |  |      |          |   |               |
|       | 12       | ÷            | N          |  |      |          |   |               |
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|                 | Application/Control No. | Applicant(s)/Patent Under Reexamination |  |  |  |
|-----------------|-------------------------|---|--|--|--|
| Index of Claims | 10589851                | TROWSDALE ET AL.                        |  |  |  |
|                 | Examiner                | Art Unit                                |  |  |  |
|                 | Michael Szperka         | 1644                                    |  |  |  |

|          |   |          |            | <b>  </b>   Mi | Michael Szperka |                |      |   | 1644 |        |  |  |
|----------|---|----------|------------|----------------|-----------------|----------------|------|---|------|--------|--|--|
| <b>✓</b> | ✓ Rejected -  |          | Can        | Cancelled N    |                 | Non-Elected    |      | A | Арр  | Appeal |  |  |
| =        | = Allowed ÷   |          | Res        | tricted        | ı               | I Interference |      | O | Obje | cted   |  |  |
|          | ☐ Claims renumbered in the same order as presented by applicant ☐ CPA ☐ T.D. ☐ R.1.47 |          |            |                |                 |                |      |   |      |        |  |  |
|          | CLA   | IM       |            |                |                 |                | DATE |   |      |        |  |  |
| Fi       | inal  | Original | 09/23/2009 | 02/12/2010     |                 |                |      |   |      |        |  |  |
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